



Attorney Docket No. 9060-22

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: Esa Paatero

Serial No.: 10/808,007

Filed: March 24, 2004

For: POWER CONVERSION APPARATUS WITH DC BUS PRECHARGE
CIRCUITS AND METHODS OF OPERATING THEREOF

Group Art Unit: 2838

Examiner: Rajnikant B. Patel

Confirmation No.: 5679

Date: December 13, 2005

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT AND RESPONSE TO RESTRICTION REQUIREMENT

Sir:

Applicants provide the present Amendment and Response to Restriction Requirement to address the issues raised in the Office Action mailed November 30, 2005.

If any extension of time for the accompanying response or submission is required, Applicants requests that this be considered a petition therefor. The Commissioner is hereby authorized to charge any additional fee, which may be required, or credit any refund, to our Deposit Account No. 50-0220.

Amendments to the Claims begin on page 2 of this paper.

Remarks/Arguments begin on page 11 of this paper.

12/15/2005 MGE BREM1 00000012 10808007

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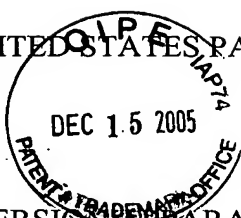
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 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an AMENDMENT in the above-identified patent application.

- ☐ Applicant claims small entity status. See 37 CFR §1.27.
☐ No additional fee is required.
☐ The fee has been calculated as shown below:

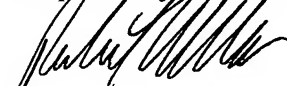
(COL. 1)		(COL. 2)	(COL. 3)	SMALL ENTITY		OTHER THAN A SMALL ENTITY	
	Claims Remaining After Amendment	Highest Number Previously Paid For	Present Extra	RATE	ADDIT. FEE	OR RATE	ADDIT. FEE
Total	48	47	= 1	x 25=	\$	x 50=	\$ 50.00
Indep	5	5	= 0	x100=	\$	x200=	\$.00
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM				+180=	\$	+360=	\$
				Total Add. Fee \$		OR Total	\$ 50.00

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior Amendment or the number of claims originally filed.

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Page 2

- ☐ Please charge my Deposit Account No. 50-0220 in the amount of \$____ for ____.
- ☒ A check in the amount of \$50.00 to cover the additional claims fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge the appropriate fees associated with this communication or credit any overpayment to Deposit Account No. 50-0220.

Respectfully submitted,

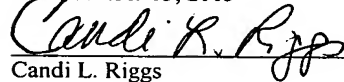


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CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.8

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA, 22313-1450, on December 13, 2005



Candi L. Riggs